

SECTION 7: GENERAL

A. PLAN AMENDMENTS

1. This plan will be amended whenever necessary to reflect new or revised Federal statutes or regulations or material changes in any phase of the American Samoa law, organization, policy, or State Agency operations

American Samoa will transmit these changes to the HCFA San Francisco Regional Office attached to the Form HCFA-179 (3-80). These changes should be submitted within 90 calendar days from the proposed effective date.

Note: The Reports outlined in Sections 2 and 6 are not considered plan amendments for the purposes of this part.

2. The HCFA Region IX Office will advise American Samoa in writing of any plan amendments required due to changes in Federal laws or regulations.
3. American Samoa may request plan changes on its own initiative at any time, as long as the provisions of Title 19 Section 1902(j) and the Secretary's waiver are complied with.
4. Significant changes to this State Plan which are not consistent with the Secretary's waiver shall be submitted to the Secretary of DHHS as a modification to the waiver, rather than as a State plan amendment.

B. NON-DISCRIMINATION

The Medicaid Plan assures that no person shall be subjected to discrimination on the grounds of race, color, national origin,

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83-1	DEFECTIVE	10/1/82
SUPERSEDED BY TRANSM # 83-3		
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religion, or handicap, or denied the benefits of this financial assistance. It further assures compliance with Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973.

C. TERRITORIAL GOVERNOR'S REVIEW

The Medicaid Agency will provide the Office of the Governor with the opportunity to review amendments, any new State Plan and subsequent amendments, and long-range program planning projections or other periodic reports. Any comments will be transmitted to the Health Care Financing Administration with such comments.

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APPROVED	10-3-83	EFFECTIVE	10-1-83

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I do hereby certify that I am authorized to submit this plan on behalf
of the:

DEPARTMENT OF HEALTH

Designated Single State Agency

8 Dec. 1982
Date


Signature

Director of Health
Title

TRANSMITTAL # <u>83-1</u>	EFFECTIVE <u>10/1/82</u>
RECEIVED BY _____	SUPERSEDED BY TRANS # <u>83-3</u>
APPROVED <u>10-3-83</u>	EFFECTIVE <u>10-1-83</u>

INDIRECT COST NEGOTIATION AGREEMENT

Date: JUN 22 1981

American Samoa Government
Pago Pago, American Samoa 96799

FILING REF: This replaces
Negotiation Agreement
dated 10/14/80

The indirect cost rate contained in this Consolidated Central Service Cost Allocation Plan Agreement applies to all grants and contracts with the Federal Government to which Federal Management and Budget Circular No. A-87 applies, subject to the limitations contained in Section II, B. of this agreement. The rate was negotiated by the American Samoa Government, Department of Administrative Services and the Office of the U.S. Government Comptroller for American Samoa, U.S. Department of the Interior, in accordance with the authority contained in Attachment A, Section J.3 of the Circular.

SECTION I: RATES

Type	Effective Period		Rate*	Locations	Applicable To
	From	To			
Fixed with Carry-Forward	10/1/80	9/30/81	12.1	All	All Programs in all Depart- ments and Agencies
Fixed with Carry-Forward	10/1/81	9/30/82	12.6	All	All Programs in all Departments and Agencies

* Base: Direct salaries and wages, excluding fringe benefits.

Treatment of Fringe Benefits: Fringe benefits applicable to direct salaries and wages are treated as other direct costs.

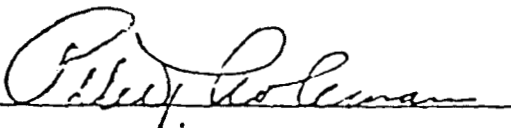
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10/1/82
TRANSM # 83-2
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- A. **ALLOCATIONS:** Use of the rate contained in this agreement is subject to any statutory or administrative limitation and is applicable to a given grant or contract only to the extent that funds are available. Acceptance of the rate agreed to herein is predicated upon the conditions: (1) that no costs other than those incurred by the American Samoa Government were included in its indirect cost pool as finally accepted and that such incurred costs are legal obligations of the American Samoa Government and allowable under the governing cost principles; (2) that the same costs that have been treated as indirect costs have not been claimed a direct costs; (3) that similar types of costs have been accorded consistent treatment; and (4) that the information provided by the American Samoa Government which was used as a basis for acceptance of the rates agreed to herein is not subsequently found to be materially inaccurate.
- B. **AUDIT:** Adjustments to amounts resulting from audit of the cost allocation plan upon which the negotiation of this agreement was based will be compensated for in a subsequent negotiation.
- C. **CHANGES:** The fixed with carry-forward rate contained in this agreement is based on the organizational structure and the accounting system in effect at the time the proposal was submitted. Changes in the organizational structure or changes in the method of accounting for cost which affect the amount of reimbursement resulting from use of the rate in this agreement require the prior approval of the authorized representative of the responsible negotiation agency. Failure to obtain such approval may result in subsequent audit disallowances.
- D. **NOTIFICATION TO FEDERAL AGENCIES:** Copies of this document may be provided to other Federal offices as a means of notifying them of the agreement contained herein.
- E. **SPECIAL REMARKS:** Federal programs currently reimbursing indirect costs by means other than the rate cited in this agreement should be credited for such costs and the applicable rate cited herein applied to the appropriate base to identify the proper amount of indirect costs allowable to the program.

By the American Samoa Government

 151

Peter E. Coleman

Name

Governor of American Samoa

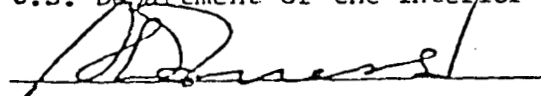
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Date

By the Responsible Agency for the
Federal Government

Office of the U.S. Government
Comptroller for American Samoa
U.S. Department of the Interior



S.D. Jones, Jr.

Name

U.S. Government Comptroller for Am. Samoa

Title

JUN 22 1981

Date

Negotiated by: William J. Prowse

TRANSMITTAL # 83-1	10/1/82
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